## **QEPA**

Testimony Before The
Sixty-Ninth General Assembly
State of Colorado

Introduced House Bill 13-1275

## A Bill For An Act

CONCERNING THE COLLECTION OF HUMAN HEALTH DATA REGARDING OIL AND GAS OPERATIONS IN COUNTIES NEAR THE FRONT RANGE.

## Dollis Wright, CEO Quality Environmental Professional Associates, Inc.

Dollis is the president and founder of QEPA, an environmental health risk communication firm. She has worked in the government and private sector for over twenty five years in the fields of Epidemiology and Toxicology. She started her career working for the Centers for Disease Control collecting epidemiological data for the Metropolitan Atlanta Congenital Birth Defects and Very Low Birth Weight Program. She has conducted research in male and female reproductive potential for the National Institute for Occupational Safety and Health (NIOSH). Dollis served as the Staff Toxicologist and Director of Environmental Epidemiology for the Indiana State Department of Health, where she was responsible for reducing and preventing human exposure to chemicals spilled or released throughout the State. In the 11 years since she started QEPA, her clients range from U.S. EPA to Industry. The QEPA team of associates performs critical reviews of documents for scientific soundness, OSHA Hazardous Materials and Site Investigation training, public meeting presentations, and consultation in risk communication for communities with chemical exposure concerns.

Thank you for this opportunity to comment on introduced house bill 1275. My name is Dollis Wright I am the CEO and founder of Quality Environmental Professional Associates. I have over 25 years of experience in toxicology and epidemiology research. I have worked for the Georgia and Indiana State Departments of Health, the Centers for Disease Control, The National Institute For Occupational Safety And Health, and the Agency for Toxic Substances and Disease Registry. I have authored many Health Assessments and Consultations for Superfund Hazardous Wastes Sites, conducted many exposure investigations, cancer cluster investigations, community health, and Health Professional Education. I have conducted technical and literature reviews of most of the existing data on oil and gas, and provided expert testimony at the oil and gas hearings in 1998 and 2013. I have conducted public awareness campaigns for the USEPA for the past 2 years to increase community awareness about chemical exposures and their impacts on children.

Today I would like to share with you 5 question that I have on introduced house bill 1275. I want to be clear that my questions and comments are presented here to encourage good, sound, defensible data, on the impacts of oil and gas operations on human health. My passion is helping clients and or communities make informed decisions about health based on facts not perceptions.

- #1 The analysis of the data is due to the general assembly March 15, 2014. What kind of results are you expecting to receive with less than 10 months to complete what took a comparable study 3 to 4 years from selection process to presentation of results. I am referring to the St. Mary's Saccomanno Research Institute and Mesa State College study. I am afraid that, the reviewers and most importantly the citizens of these counties will be disappointed. As proposed your time frame will not allow your selected contractor the time to gather scientifically defensible data that will be able to determine the impact of oil and gas activities on human health. At the end of most studies the report usually has a summary of limitations or noted problems. The limitations of the proposed study are clear before you even start. Please consider the results you will get in such a short time frame.
- What is the goal of the study? What do you hope to gain?

  On page 9 of the introduced bill, section 6 the safety clause states. "The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety."

  A huge part of protecting public health is knowledge and understanding. The simple act of washing hands has proven to prevent the spread of disease. I would humbly suggest to this assembly that what is needed is not another quick study but public education and understanding of the risk. Again I refer to the Saccamanno study. The scientist in that study took a three pronged approach to the study.
  - 1st they held community focus groups to help identify public real and perceived health concerns.
  - 2nd they conducted a health risk assessment that included an exposure evaluation and an extensive health survey.
  - And finally they analyzed the data and shared it with the community in educational forums.

I would suggest to you that what may be more helpful to protecting public health is quite simply some quality education of chemical risk that comes from an unbiased reliable source. Our communities are being educated by the press and the media through sound bites when they deserve much more than that.

I want to share with you some of the findings of the Saccammano study to shed light on what could not be determined from a review that took three years much less one that may take less than 10 months.

- "We cannot say conclusively that any of these health trends are directly related to the presence of natural gas industry activities or to other factors.
- O The author also states "The nature of the study and the Community Health Risk Analysis of Oil and Gas Industry Impacts in Garfield County available data make it impossible to

- provide definitive causal relationships between observed health and exposures, particularly at the individual level.
- O Both risk and causation involve probability statements: we <u>may never be able to say with</u> <u>certainty</u> that a particular health condition is caused by an exposure to a potentially toxic material.

I believe that the study as proposed without any apparent public participation and education is a recipe for disappointment.

- The bill proposes an oversight committee that is other than the agency issuing the request for proposal. Why is there a need to re-create the wheel. The health department has the necessary expertise and authority to conduct or oversee such a study. Why is another layer needed? CDPHE is charged with the responsibility of protecting public health. It is not clear to me why the assembly would want to introduce another limitation factor to the study. Why would you take the authority from a known functioning entity and give it to an unknown?
- #4 A review of existing epidemiological data to determine whether oil and gas operations can have an adverse effect on human health. The fundamental premise of toxicology is that everything is a poison. In other words everything and anything can be a problem under the right conditions. What is the intent of the author of the introduced bill to determine if operations can cause a problem or whether it is causing a problem? There is a difference.
- #5 The report is required to be peer reviewed. How do you define peer reviewed? From my personal experience at the January COGCC hearings it was quite apparent that all stakeholders were not on the same page with respect to the definition of peer review. Does this mean that the report needs to be completed, accepted, and published within 10 months? Is this internal peer review or independent professional peer review.

In conclusion I am concerned that, all parties involved in the proposed study as is are going to be disappointed. I do not believe that you will be any closer to knowing the answer to your question on March 15, 2014 than you are today. Primarily because your question is not clear. I humbly encourage the assembly to clarify your goals and realistically consider what you will accomplish in this study.